ENIRY BLANK			
PLEASE TYPE	OR PRINT	Entered prev	ious May Show
☐ Ms. ☐ Mr. Artist	PATRICK M	Yes Confr	
Permanent Address Str		new Ro.	(Last Name Last)
Str		000 -	City
44106	Tel. (216)	932-24	11
Zip _	Area Code		
Temporary or Studio Address_	SAME		
	Street		City
	Tel. ()		
Zip	Area Code		
If you do not pre Western Reserve,			
Collaborator	NONE		
	(If Any)		
If May Show ent Artist will pi Museum sho Museum sho	ck up at Museu uld dispose of.	m.	
Special Instruction When necessary is how the object is	nclude below in		
1 fox	Top X-	5-7-	
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Note carefully caunderstood that its own account a	the Museum wil	I have the right	t to dispose for
It is also understo exhibition until [ed objects will	remain on
The submission of all conditions pri		1 / //	

Signature .

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1980 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

17 2	XA	
HATRICK X.	CORRIGAN	
Name 2749 MATER	ED B.	
Address Here	ENS, Onio	44106
City & State		Zip

7	DETAC	CH				
NOTIFICATION #2			DO NOT DETACH			
☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts						
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80 (3	1)	*	75 A 170			
2 □ 1. Paintings □ 2. Graphics □ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts						
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DO NOT WRITE IN THIS S	ECTION	ACCEPTED	REJECTE	D		
81 (3)		X			
This is your only receipt to claim your object(s).						

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.